POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*BT*		9-28-00
O.I.P.E. CLASSIFIER		5	10-11-00
FORMALITY REVIEW	M.M.	71620	11-17.00
RESPONSE FORMALITY REVIEW	M.M.	71620	2-2.01

INDEX OF CLAIMS

✔	.... Rejected		N	....	Non-elected
=	.... Allowed		I	....	Interference
—	(Through numeral)... Canceled		A	....	Appeal
÷	.... Restricted		O	....	Objected

Final	Original	Date						Final	Original	Date						Final	Original	Date					
	1								51								101						
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	49								99								149						
	50								100								150						

If more than 150 claims or 10 actions
staple additional sheet here

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